





HAWAII STATE ETHICS COMMISSION ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REFORM 23 P2:35

REF	PORT YEAR: 2013	3	Amended Statem	ent		
For	Lobbying Reporting Pe	riod: January 1 -	– last day of February	✓ March 1 - April	30 May	STATE OF HAWAII
OR	GANIZATION INFO	RMATION				
Seven-Eleven Hawaii, Inc. Organization Name 1755 Nuuanu Avenue, 2nd Floor			Blake Yokotake Contact Person			
Mai	ling Address (Number	r and Street or P.O. B	ox)			
Honolulu				HI		96817
City				State		Zip Code
(808) 526-1711			Blake_Yokotake@7-11.com			
Tele	ephone	Extension	Email Address			
PAF	RT I. TOTAL EXPEN	IDITURES			· · · · · · · · · · · · · · · · · · ·	
1	Preparation & Dist	ribution of Lobbying	ı Materials		1	Total Amount 0.00
2	Preparation & Distribution of Lobbying Materials1 Media Advertising					0.00
3	_					0.00
4	Postage					
	Lobbyist Name			Compensation Pa	id	
	A. George A. "Red	" Morris		A	837.70	
	B. John H. Radclift	fe		B	837.69	
	C			c		
	D			D		
	E			E	<u> </u>	
	F			F		
	G. Total from Additional Attached Sheet(s)			G,		
	Add lines A through G			Total Compens	ation Paid ▶ 4	1,675.39
5	Fees Paid to Cons	ultants (other than t	o Lobbyists)		5	0.00
6	Entertainment & Events				6	0.00
7	Receptions, Meals, Food & Beverages				7	0.00
8	Gifts			8	0.00	
9	Loans			9	0.00	
10	Other Disbursemen	nts			10	0.00
	Add lines 1 throu	gh 10		Total Exp	enditures ►	1,675.39

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY List all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period. Name & Address

n/a			
Check here if additi	onal sheets are attached		
	TURES OF \$150 OR MORE P the purpose of lobbying in the total sum	ER PERSON n of \$150 or more per person during the	statement period.
Name & Address			Amount or Value
n/a			
and the second s			
Check here if addition	onal sheets are attached		
PART II. CONTRIBUTION			to to position of
	the purpose of lobbying in the total sun	n of \$25 or more per person during the s	
Name & Address n/a			Amount or Value
11/ 0			
	<u></u>		
Check here if addition	onal sheets are attached		
PART III. SUBJECT ARE Legislative and/or administrative		orted or opposed during the statement p	eriod:
Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operation & Finance	intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawailan Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other (indicate below):
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	
I hereby certify that the stater	ments made above are correct and	d complete to the best of my knowle	edge
D 6.1-		- 5h	/
Signature of Authorized Person			5/13
Blake Yokotake		Date Human R	esource Manager
Print Name		Title	Cource Manager

Amount or Value